



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: *Johnson, et al.*

SERIAL NO.: 09/699,002

GROUP ART UNIT: 1616

FILED: October 26, 2000

EXAMINER: Badio.

FOR: HIGH VISCOSITY LIQUID CONTROLLED DELIVERY SYSTEM AND MEDICAL OR
SURGICAL DEVICE

ATTORNEY DOCKET NO.: S0351/249009

I hereby certify that this correspondence is being deposited with the
United States Postal Service as certified first class mail in an envelope
addressed to: Commissioner for Patents, P.O. Box 1450,
Alexandria, VA 22313-1450, on November 8, 2004.

Emily Guida Fooz
Emily Guida Fooz

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

DATE: November 8, 2004

NOTICE OF APPEAL TO THE
BOARD OF PATENT APPEALS AND INTERFERENCES

Sir:

Applicants appeal the decision of Examiner Badio finally rejecting claim 92
and objecting to claim 89, in the above-identified application by the final Office
Action dated May 6, 2004 and the Advisory Action mailed September 17, 2004.

The Commissioner is hereby authorized to charge Deposit Account No. 11-
0855 the fee of \$340.00 for filing a Notice of Appeal under 37 C.F.R. §1.17(e).

11/15/2004 HALI11 00000084 09699002

01 FC:1401

340.00 DP

Respectfully submitted,

Bruce D. Gray

Bruce D. Gray
Reg. No. 35, 799

KILPATRICK STOCKTON LLP
Suite 2800, 1100 Peachtree Street
Atlanta, Georgia 30309-4530
(404) 815-6218

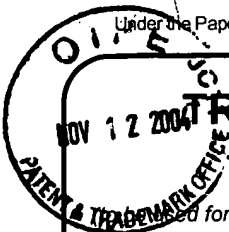
Please type a plus sign (+) inside this box → ☐

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



TRANSMITTAL FORM

Use this form for all correspondence after initial filing)

Application Number	09/699,002	
	Filing Date	October 26, 2000
	First Named Inventor	Gibson, et al.
	Group Art Unit	1616
	Examiner Name	Badio
Attorney Docket Number	S0351/249009	
Total Number of Pages in This Submission		

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input checked="" type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Under 37 C.F.R. 1.137(b)	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	-Check in amount of \$1210
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	-Return Receipt Postcard
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Bruce D. Gray, Reg. No. 35,799 Kilpatrick Stockton LLP
Signature	
Date	November 8, 2004

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: November 8, 2004			
Typed or printed name	Emily Guida Foos		
Signature		Date	November 8, 2004

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.